

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233																	
S & H Steel Co																					
PAYROLL NO. 11.0		FOR WEEK ENDING 10/02/2016		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA																	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008																	
(1) NAME, ADDRESS AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.			
			MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS		
			26	27	28	29	30	1	2												
			HOURS WORKED EACH DAY																		
(b) (6)	(b) (6)	Ironworker, Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1496.40	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1596.05
			O	0	0	0	0	0	0	0	0.00	0.00 0.00	2233.90								
			S	0	0	0	0	0	0	0	24.00	33.50 28.85									
Other Deduction Detail (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Certified Payroll - October 2016.pdf

Date October 7th, 2016

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

26th day of September, 2016, and ending the 2nd day of October, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #11

NAME AND TITLE:

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date October 14th, 2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

3rd day of October, 2016, and ending the 9th day of October, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #12 - No Work Performed

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date October 27th, 2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Callexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

10th day of October, 2016, and ending the 16th day of October, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #13 - No Work Performed

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 14.0		FOR WEEK ENDING 10/23/2016		PROJECT AND LOCATION Callexico West LPOE – Phase 1 Callexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF RESID.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.			
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS		
				17	18	19	20	21	22	23												
(b) (6)	(b) (6)	Ironworker: Ommntll/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	0.00	187.05	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	939.36
			C	0	0	0	0	0	0	0	0	0.00	0.00	0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	0	0	0	3.00	0	0	0	0	3.00	33.50	28.85	1254.31							81715

Other Deduction Detail: (b) (6)

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Certified Payroll - October 2016.pdf

Date October 27th, 2016

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

17th day of October, 2016, and ending the 23rd day of October, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #14

NAME AND TITLE:

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date November 7th, 2016

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

24th day of October, 2016, and ending the 30th day of October, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

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REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #15 Payroll #15 - No Work Performed

NAME AND TITLE:

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Certified Payroll-November 2016.pdf

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 16.0		FOR WEEK ENDING 11/06/2016		PROJECT AND LOCATION Calxico West LPOE – Phase 1 Calxico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT D T	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.
				MON TUE WED THU FRI SAT SUN										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					
				31	1	2	3	4	5	6				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	
(b) (6)	1	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	498.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				0	0	0	0	0	0	0	0.00	0.00 0.00							
				0	8.00	0	0	0	0	0	8.00	33.50 28.85							
																		1303.88	
																		81837	

(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	498.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				0	0	0	0	0	0	0	0.00	0.00 0.00							
				0	8.00	0	0	0	0	0	8.00	33.50 28.85							
																		1204.25	
																		81838	

Other Deduction Detail: (b) (6)

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Certified Payroll-November 2016.pdf

Date November 15th,
2016

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

31st day of October, 2016, and ending the 6th day of November, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates
have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly
from the full wages earned by any person, other than permissible deductions as defined in Regulations,
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48
Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
applicable wage rates contained in any wage determination incorporated into the contract; that the
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and
Training, United States Department of Labor, or if no such recognized agency exists in a State, are
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the
above referenced payroll, payments of fringe benefits as listed in the contract have been
or will be made to appropriate programs for the benefit of such employees, except as
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as
indicated on the payroll, an amount not less than the sum of the applicable basic
hourly wage rate plus the amount of the required fringe benefits as listed in the
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #16

NAME AND TITLE

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
31 OF THE UNITED STATES CODE.

Date November 23rd,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1 that during the payroll period commencing on the
(Building or Work)

7th day of November, 2016, and ending the 13th day of November, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #17 Payroll #17 - No Work Performed

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date November 23rd,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

14th day of November, 2016, and ending the 20th day of November, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #18 - No Work Performed

NAME AND TITLE.

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date December 6th, 2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1 that during the payroll period commencing on the
(Building or Work)

21st day of November, 2016, and ending the 27th day of November, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

--

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #19 - No Work Performed

NAME AND TITLE.	SIGNATURE
Marlee Roberts, Project Admin.	Signed Electronically
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Date December 12th,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

28th day of November, 2016, and ending the 4th day of December, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #20 - No Work Performed

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date December 12th,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

5th day of December, 2016, and ending the 11th day of December, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

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REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #21 - No Work Performed

NAME AND TITLE: Marlee Roberts, Project Admin.	SIGNATURE Signed Electronically
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Date December 16th,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employeeed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

12th day of December, 2016, and ending the 18th day of December, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #22 - No Work Performed

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Date December 16th,
2016

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employeeed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1 ; that during the payroll period commencing on the
(Building or Work)

19th day of December, 2016, and ending the 25th day of December, 2016

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Payroll #23 - No Work Performed

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 24.0		FOR WEEK ENDING 01/01/2017		PROJECT AND LOCATION Calxico West LPOE – Phase 1 Calxico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. or 1st	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				26	27	28	29	30	31	1				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*			
				HOURS WORKED EACH DAY										TOTAL DEDUCTIONS							
(b) (6)	(b)	Ironworker: Ommntd/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	997.60	(b)	(b)	(b)	(b)	(b) (6)	(b) (6)	1178.84 DD4436
				0	0	0	0	0	0	0	0.00	0.00 0.00									
				0	0	0	8.00	8.00	0	0	16.00	33.50 28.85	1513.80								
Other Deduction Detail: (b) (6)																					
(b) (6)	(b)	Ironworker: Ommntd/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	997.60	(b)	(b)	(b)	(b)	(b) (6)	(b) (6)	1066.03 82238
				0	0	0	0	0	0	0	0.00	0.00 0.00									
				0	0	0	8.00	8.00	0	0	16.00	33.50 28.85	1346.40								
Other Deduction Detail: (b) (6)																					
(b) (6)	(b)	Ironworker: Ommntd/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	997.60	(b)	(b)	(b)	(b)	(b) (6)	(b) (6)	1213.11 82239
				0	0	0	0	0	0	0	0.00	0.00 0.00									
				0	0	0	8.00	8.00	0	0	16.00	33.50 28.85	1646.60								
Other Deduction Detail: (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a) The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

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Date January 6th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

26th day of December, 2016, and ending the 1st day of January, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #24

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE

"ALL REDACTIONS ON THIS PAGE - B(6)"

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 25.4		FOR WEEK ENDING 01/08/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OUT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				2	3	4	5	6	7	8				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b) (6)	Ironworker: Ommntll/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1899.90 DD4481
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2525.56	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
(b) (6)	(b) (6)	Power Equip. Oper. Group 10(cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1784.90	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2002.75 DD4486
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	0	2.00	10.00	8.00	8.00	0	0	26.00	45.30 23.35	2739.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntll/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	748.20	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2002.75 DD4486
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	0	8.00	0	2.00	2.00	0	0	12.00	33.50 28.85	2739.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntll/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1362.78 DD4485
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2519.32	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
Other Deduction Detail: (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 25.4		FOR WEEK ENDING 01/08/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST START	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9) NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	TOTAL DEDUCTIONS	
				2	3	4	5	6	7	8										
(b) (6)	(b)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1685.44 DD4496
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2489.55	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1864.58 82341
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2511.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1818.56 82342
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2605.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1946.81 DD4508
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	0	10.00	10.00	10.00	8.00	0	0	38.00	33.50 28.85	2561.01	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Date January 13th, 2017

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West I.POE - Phase 1; that during the payroll period commencing on the
(Building or Work)

2nd day of January, 2017, and ending the 8th day of January, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Revised Payroll #25.4

NAME AND TITLE:

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 26.0		FOR WEEK ENDING 01/15/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.		
			MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
			9	10	11	12	13	14	15											
(b) (6)	(b) (6)	Ironworker: Ommnt/Rn/rcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50 DD4481
			O	0	0	0	0	0	0	0	0.00	0.00 0.00								
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2669.80							
(b) (6)	(b) (6)	Ironworker: Ommnt/Rn/rcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1906.35 dd4540
			O	0	0	0	0	0	0	0	0.00	0.00 0.00								
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2788.00							
(b) (6)	(b) (6)	Ironworker: Ommnt/Rn/rcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1431.36 DD4543
			O	0	0	0	0	0	0	0	0.00	0.00 0.00								
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2667.70							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2265.45	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2159.48 DD4486
			O	0	0	0	0	0	0	0	0.00	0.00 0.00								
			S	7.00	8.00	8.00	8.00	4.00	0	0	33.00	45.30 23.35	2972.94							

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 26.0		FOR WEEK ENDING 01/15/2017		PROJECT AND LOCATION Calxico West LPOE - Phase 1 Calxico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OR ADT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				MON 9	TUE 10	WED 11	THU 12	FRI 13	SAT 14	SUN 15				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	436.45	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2159.48
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	1.00	0	2.00	0	4.00	0	0	7.00	33.50 28.85	2972.94	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4486
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2662.78	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4555
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1809.14
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2660.50	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4556
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1987.98
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	82399

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 26.0		FOR WEEK ENDING 01/15/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.		
			MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
			9	10	11	12	13	14	15											
(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00					(b) (6)		
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b)	(b)	(b)	(b)	(b) (6)		1942.67
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50							82342

(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00					(b) (6)		
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b)	(b)	(b)	(b)	(b) (6)		2034.61
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2681.62							DD4570

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Date January 19th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

9th day of January, 2017, and ending the 15th day of January, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #26

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 27.0		FOR WEEK ENDING 01/22/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				MON 16	TUE 17	WED 18	THU 19	FRI 20	SAT 21	SUN 22				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1974.33 DD4576
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2639.80							
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1853.91 DD4577
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2788.80							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1411.23 DD4580
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2667.70							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2402.75	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2152.01 DD4483
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	7.00	8.00	0	0	35.00	45.30 23.35	2985.54							
Other Deduction Detail: (b) (6)																				

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 27.0		FOR WEEK ENDING 01/22/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF ABT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				16	17	18	19	20	21	22				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b) (6)	Ironworker Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	0.00	311.75	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2152.01 DD4483
				0	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	2.00	0	0	1.00	2.00	0	0	5.00	33.50	28.85	2985.54	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24 DD4555
				0	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2662.78	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD4556
				0	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2660.50	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85 82399
				0	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)			
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2690.20	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																					

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PAYROLL NO. 27.0		FOR WEEK ENDING 01/22/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
			MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
			16	17	18	19	20	21	22										
(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11 82342
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50						
Other Deduction Detail (b) (6)																			
(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.16 DD4607
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62						
Other Deduction Detail (b) (6)																			

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Date January 30th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

16th day of January, 2017, and ending the 22nd day of January, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15 Payroll #27

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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PAYROLL

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NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 28.0		FOR WEEK ENDING 01/29/2017		PROJECT AND LOCATION Calexico West LPOE -- Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST START	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				23	24	25	26	27	28	29										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50 DD44638
				O	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1856.92 DD4639	
				O	0	0	0	0	0	0	0.00									0.00 0.00
				S	8.00	8.00	8.00	8.00	8.00	0	0									40.00
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1361.24 DD4642	
				O	0	0	0	0	0	0	0.00									0.00 0.00
				S	8.00	8.00	8.00	8.00	8.00	0	0									40.00
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0.00	0.00 0.00	1304.35	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1684.66 DD4645	
				O	0	0	0	0	0	0	0.00									0.00 0.00
				S	3.00	5.00	8.00	5.00	0	0	0									19.00
Other Deduction Detail: (b) (6)																				

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PAYROLL NO. 28.0		FOR WEEK ENDING 01/29/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND IDENTIFICATION NUMBER OF EMPLOYEE	(2) NO OF WITHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				23	24	25	26	27	28	29										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	810.55	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1684.66 DD4645
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	5.00	3.00	2.00	3.00	0	0	0	13.00								
Other Deduction Detail (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24 DD4654
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								
Other Deduction Detail (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD4655
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								
Other Deduction Detail (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.84 82399
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								
Other Deduction Detail (b) (6)																				

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PAYROLL NO. 28.0		FOR WEEK ENDING 01/29/2017		PROJECT AND LOCATION Calxico West LPOE – Phase 1 Calxico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. or LOT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				23	24	25	26	27	28	29										
(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11 82510
				O	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2759.50	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				

(b) (6)	(b)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.16 DD4669
				O	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2675.62	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Certified Payroll-January 2017.pdf

Date February 3rd, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

23rd day of January, 2017, and ending the 29th day of January, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #28

NAME AND TITLE.

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 29.0		FOR WEEK ENDING 02/05/2017		PROJECT AND LOCATION Calexico West LPOE -- Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	STAT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
				30	31	1	2	3	4	5											
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.51
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2669.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4638
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1856.90
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2788.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4676
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.23
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2667.70	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4679
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10 (cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	205.95	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.30
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	0	3.00	0	0	0	0	0	0	3.00	45.30 23.35	2783.04	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4682
Other Deduction Detail: (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 29.0		FOR WEEK ENDING 02/05/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.		
			ST D O N E	HOURS WORKED EACH DAY									FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
				MON 30	TUE 31	WED 1	THU 2	FRI 3	SAT 4											SUN 5
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2306.95	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.30
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4682
			S	8.00	5.00	8.00	8.00	8.00	0	0	37.00	33.50 28.85	2783.04							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.23
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4691
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2662.78							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4655
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2660.50							
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.86
			O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	82614
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20							
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 29.0		FOR WEEK ENDING 02/05/2017		PROJECT AND LOCATION Calxico West LPOE – Phase 1 Calxico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100	(4) DAY AND DATE							(5)	(6)	(7)	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9)				
				MON	TUE	WED	THU	FRI	SAT	SUN	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK/ Check No.			
				30	31	1	2	3	4	5													
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc		D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11
				O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2759.50	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	82510
Other Deduction Detail (b) (6)																							
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc		D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.15
				O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2675.62	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4705
Other Deduction Detail (b) (6)																							

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"ALL REDACTIONS ON THIS PAGE - B(6)"

Date February 9th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

30th day of January, 2017, and ending the 5th day of February, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #29

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 30.0		FOR WEEK ENDING 02/12/2017		PROJECT AND LOCATION Calxico West LPOE – Phase 1 Calxico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF DAY	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.								
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions													
				6	7	8	9	10	11	12				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS							
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50						
				0	0	0	0	0	0	0	0.00											0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0																	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1646.90						
				0	0	0	0	0	0	0	0.00											0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0																	
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1546.23						
				0	0	0	0	0	0	0	0.00											0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0																	
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00	1304.35	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1711.67						
				0	0	0	0	0	0	0	0.00											0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				0	3.00	8.00	8.00	0	0	0																	
Other Deduction Detail: (b) (6)																											

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"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 30.0		FOR WEEK ENDING 02/12/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.								
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS							
				6	7	8	9	10	11	12																	
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	810.55	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1711.67 DD4743						
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	5.00	0	0	0	0	0	13.00															33.50 28.85
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24 DD4752						
				O	0	0	0	0	0	0	0	0.00	0.00 0.00									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD4753						
				O	0	0	0	0	0	0	0	0.00	0.00 0.00									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85 82614						
				O	0	0	0	0	0	0	0	0.00	0.00 0.00									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
Other Deduction Detail: (b) (6)																											

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 30.0		FOR WEEK ENDING 02/12/2017		PROJECT AND LOCATION Callexico West LPOE – Phase 1 Callexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF DAY	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.							
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS						
				6	7	8	9	10	11	12																
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.10					
			O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
Other Deduction Detail: (b) (6)																										

(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.16						
			O	0	0	0	0	0	0	0	0.00	0.00 0.00										(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85															
Other Deduction Detail: (b) (6)																											

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"ALL REDACTIONS ON THIS PAGE - B(6)"

Date February 16th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Callexico West LPOE – Phase 1; that during the payroll period commencing on the
(Building or Work)

6th day of February, 2017, and ending the 12th day of February, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #30

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 31.0		FOR WEEK ENDING 02/19/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. Order	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				13	14	15	16	17	18	19				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.49
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85									
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1853.92
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85									
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.23
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85									
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	498.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1020.13
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)								
				8.00	0	0	0	0	0	0	8.00	33.50 28.85									
Other Deduction Detail: (b) (6)																					

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PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233																
S & H Steel Co																				
PAYROLL NO. 31.0		FOR WEEK ENDING 02/19/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA																
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008																
(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON TUE WED THU FRI SAT SUN										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				13	14	15	16	17	18	19				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24 DD4788
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2662.78						

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD4789
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2660.50						

Other Deduction Detail: (b) (6)

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85 82707
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20						

Other Deduction Detail: (b) (6)

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.10 82708
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50						

Other Deduction Detail: (b) (6)

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NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 31.0		FOR WEEK ENDING 02/19/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT B OT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				13	14	15	16	17	18	19										
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnrcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.15 DD4803
				O	0	0	0	0	0	0	0.00	0.00	0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50	28.85	2675.62	(b) (6)	(b) (6)	(b) (6)	(b) (6)	

Other Deduction Detail: (b) (6)

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date February 23rd, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1 that during the payroll period commencing on the
(Building or Work)

13th day of February, 2017, and ending the 19th day of February, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #31

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 32.0		FOR WEEK ENDING 02/26/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OR ABT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					
				20	21	22	23	24	25	26				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50 DD4837
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2669.80					
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1879.19 DD4838
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2830.00					
Other Deduction Detail: (b) (6)																			
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.23 DD4840
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2667.70					
Other Deduction Detail: (b) (6)																			
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24 DD4852
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2662.78					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 32.0		FOR WEEK ENDING 02/26/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				20	21	22	23	24	25	26				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.70
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2660.50							DD4853
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.84
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2690.20							82766
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2759.50							82767
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.16
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2675.62							DD4867
Other Deduction Detail: (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date March 3rd, 2017

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

20th day of February, 2017, and ending the 26th day of February, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #32

NAME AND TITLE

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 33.0		FOR WEEK ENDING 03/05/2017		PROJECT AND LOCATION Calexico West LPOE -- Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
														* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				MON 27	TUE 28	WED 1	THU 2	FRI 3	SAT 4	SUN 5				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.51
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2007.89
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1941.72
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2042.72
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS OF THIS PAGE - B(6)"

Date March 8th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employeeed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

27th day of February, 2017, and ending the 5th day of March, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #33

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 34.0		FOR WEEK ENDING 03/12/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	str	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				6	7	8	9	10	11	12				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2669.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4873
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	872.90	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1371.83
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	0	0	2.00	8.00	4.00	0	0	0	14.00	33.50 28.85	1775.19	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4914
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	411.90	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1371.83
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	0	0	6.00	0	0	0	0	0	6.00	45.30 23.35	1775.19	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	DD4914
Other Deduction Detail: (b) (6)																					
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.86
			O	0	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
			S	8.00	8.00	8.00	8.00	8.00	0	0	0	40.00	33.50 28.85	2690.20	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	82838
Other Deduction Detail: (b) (6)																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS OF THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 34.0		FOR WEEK ENDING 03/12/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT AD DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				6	7	8	9	10	11	12										
(b) (6)	(b)	Ironworker: Ommntl/Rntrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11 82839
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50						
Other Deduction Detail: (b) (6)																				
(b) (6)	(b)	Ironworker: Ommntl/Rntrcng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.15 DD4903
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62						
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date March 16th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

6th day of March, 2017, and ending the 12th day of March, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #34

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 35.0		FOR WEEK ENDING 03/19/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.								
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS							
				13	14	15	16	17	18	19																	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50 DD4973						
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)									(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00															33.50 28.85
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2244.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2026.68 DD4979						
				O	0	0	0	0	0	0	0.00	0.00 0.00										(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	4.00	8.00	8.00	0	0	36.00															
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10 (cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	274.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2026.68 DD4979						
				O	0	0	0	0	0	0	0.00	0.00 0.00										(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	0	0	4.00	0	0	0	0	4.00															
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85 82963						
				O	0	0	0	0	0	0	0.00	0.00 0.00										(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00															
Other Deduction Detail: (b) (6)																											

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 35.0		FOR WEEK ENDING 03/19/2017		PROJECT AND LOCATION Calexico West LPOE -- Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT S B I	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.							
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions												
				MON 13	TUE 14	WED 15	THU 16	FRI 17	SAT 18	SUN 19				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS						
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11						
				0	0	0	0	0	0	0	0.00	0.00 0.00														
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
Other Deduction Detail: (b) (6)																										

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.16						
				0	0	0	0	0	0	0	0.00	0.00 0.00														
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85														
Other Deduction Detail: (b) (6)																										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date March 23rd, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1, that during the payroll period commencing on the
(Building or Work)

13th day of March, 2017, and ending the 19th day of March, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #35

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 36.0		FOR WEEK ENDING 03/26/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					
				MON 20	TUE 21	WED 22	THU 23	FRI 24	SAT 25	SUN 26				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.49 DD5034
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2669.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	1683.45	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2078.66 DD5040
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	4.00	5.00	3.00	7.00	8.00	0	0	27.00	33.50 28.85	2846.94	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	892.45	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2078.66 DD5040
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	4.00	3.00	5.00	1.00	0	0	0	13.00	45.30 23.35	2846.94	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1987.98 82963
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20	(b) (6)	(b) (6)	(b) (6)	(b) (6)	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 36.0		FOR WEEK ENDING 03/26/2017		PROJECT AND LOCATION Callexico West LPOE – Phase 1 Callexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON TUE WED THU FRI SAT SUN										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				20	21	22	23	24	25	26				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b)	(b) (6)	(b)	(b)	(b) (6)	(b) (6)	1942.67
				0	0	0	0	0	0	0	0.00	0.00 0.00									
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50								
			S																		83014

(b) (6)	(b)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b)	(b)	(b)	(b)	(b) (6)	(b) (6)	2031.15
				0	0	0	0	0	0	0	0.00	0.00 0.00									
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62								
			S																		DD5003

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date March 31st, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Callexico West LPOE - Phase 1 that during the payroll period commencing on the
(Building or Work)

20th day of March, 2017, and ending the 26th day of March, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #36

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
S & H Steel Co					
PAYROLL NO. 37.0		FOR WEEK ENDING 04/02/2017		PROJECT AND LOCATION Callexico West LPOE -- Phase 1 Callexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.									
				(4) DAY AND DATE										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions														
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS								
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	27	28	29	30	31	1	2	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50								
				O	0	0	0	0	0	0											0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0											0	40.00	33.50 28.85	2669.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	27	28	29	30	31	1	2	0.00	0.00 0.00	1496.40	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2074.79								
				O	0	0	0	0	0	0											0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	0	0	8.00	8.00	8.00	0											0	24.00	33.50 28.85	2865.84	(b) (6)	(b) (6)	(b) (6)	(b) (6)
Other Deduction Detail (b) (6)																												
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	27	28	29	30	31	1	2	0.00	0.00 0.00	1098.40	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2074.79								
				O	0	0	0	0	0	0											0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	0	0	0	0											0	16.00	45.30 23.35	2865.84	(b) (6)	(b) (6)	(b) (6)	(b) (6)
Other Deduction Detail (b) (6)																												
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	27	28	29	30	31	1	2	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69								
				O	0	0	0	0	0	0											0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				S	8.00	8.00	8.00	8.00	8.00	0											0	40.00	33.50 28.85	2660.50	(b) (6)	(b) (6)	(b) (6)	(b) (6)
Other Deduction Detail (b) (6)																												

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 37.0		FOR WEEK ENDING 04/02/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				27	28	29	30	31	1	2										
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.84 82963
				O	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20						
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.10 83095	
				O	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50						
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.15 DD5099	
				O	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62						
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

"ALL REDACTIONS ON THIS PAGE - B(6)"

Date April 11th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

27th day of March, 2017, and ending the 2nd day of April, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #37

NAME AND TITLE

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 37.0		FOR WEEK ENDING 04/02/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.								
				MON TUE WED THU FRI SAT SUN										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions													
				27	28	29	30	31	1	2				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS							
(b) (6)	(b) (6)	Ironworker; Ornmntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.50 DD5069						
				0	0	0	0	0	0	0	0.00											0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0	40.00											33.50 28.85	2669.80				
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker; Ornmntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1495.40	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2074.79 DD5075						
				0	0	0	0	0	0	0	0.00											0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				0	0	8.00	8.00	8.00	0	0	24.00											33.50 28.85	2865.84				
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1098.40	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2074.79 DD5075						
				0	0	0	0	0	0	0	0.00											0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	0	0	0	0	0	16.00											45.30 23.35	2865.84				
Other Deduction Detail: (b) (6)																											
(b) (6)	(b) (6)	Ironworker; Ornmntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD5085						
				0	0	0	0	0	0	0	0.00											0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0	40.00											33.50 28.85	2660.50				
Other Deduction Detail: (b) (6)																											

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 37.0		FOR WEEK ENDING 04/02/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT or OT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				27	28	29	30	31	1	2				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommnl/Rn/frng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.84 82963
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2690.20						
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnl/Rn/frng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.10 83095
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50						
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnl/Rn/frng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2022.15 DD5099
				O	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62						
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017

Date April 11th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Callexico West LPOE -- Phase 1; that during the payroll period commencing on the
(Building or Work)

27th day of March, 2017, and ending the 2nd day of April, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

--

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #37

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 38.0		FOR WEEK ENDING 04/09/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.							
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions												
				3	4	5	6	7	8	9				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS						
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1247.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1244.12					
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				0	0	8.00	8.00	4.00	0	0																20.00
HOURS WORKED EACH DAY																										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1853.92					
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0																
HOURS WORKED EACH DAY																										
Other Deduction Detail: (b) (6)																										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.24					
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0																
HOURS WORKED EACH DAY																										
Other Deduction Detail: (b) (6)																										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2369.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2018.50					
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	6.00	8.00	8.00	0	0																
HOURS WORKED EACH DAY																										
Other Deduction Detail: (b) (6)																										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 38.0		FOR WEEK ENDING 04/09/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT ND DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					
				3	4	5	6	7	8	9				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	
(b) (6)	(b)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	137.30	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2018.50 DD5138
				O	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	0	0	2.00	0	0	0	0	2.00	45.30 23.35	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																			
(b) (6)	(b)	Ironworker: Ommnl/Rntrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.23 DD5147
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.65	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																			
(b) (6)	(b)	Ironworker: Ommnl/Rntrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69 DD5148
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.65	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																			
(b) (6)	(b)	Ironworker: Ommnl/Rntrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85 83141
				O	0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.65	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																			

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 38.0		FOR WEEK ENDING 04/09/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT AD DY	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.		
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				3	4	5	6	7	8	9				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS	
(b) (6)	(b)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	1247.00					(b) (6)		
				C	0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1262.38	
				S	0	0	8.00	8.00	4.00	0	0	20.00	33.50 28.85	1569.88							DD5162

Other Deduction Detail: (b) (6)

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(iv) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017

Date April 17th, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calxico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

3rd day of April, 2017, and ending the 9th day of April, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Payroll #38

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage Det: CA150002 (Mod. 9)		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 39.1		FOR WEEK ENDING 04/16/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. 101 or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				10	11	12	13	14	15	16				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2149.50 DD5165
				0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2669.80	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1853.91 DD5166
				0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2788.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.23 DD5168
				0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2667.70	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00 0.00	2244.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2026.68 DD5171
				0	0	0	0	0	0	0	0.00	0.00 0.00		(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	5.00	7.00	8.00	8.00	8.00	0	0	36.00	33.50 28.85	2790.24	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	
Other Deduction Detail: (b) (6)																				

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Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Del:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 39.1		FOR WEEK ENDING 04/16/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST OT ADT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.						
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions											
				10	11	12	13	14	15	16				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS					
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0	0.00	0.00	274.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2026.68				
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)
				3.00	1.00	0	0	0	0	0															
HOURS WORKED EACH DAY																									
Other Deduction Detail: (b) (6)																									
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24				
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0															
HOURS WORKED EACH DAY																									
Other Deduction Detail: (b) (6)																									
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.69				
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0															
HOURS WORKED EACH DAY																									
Other Deduction Detail: (b) (6)																									
(b) (6)	(b) (6)	Ironworker: Ommntl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0	0.00	0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.86				
				0	0	0	0	0	0	0	(b) (6)											(b) (6)	(b) (6)	(b) (6)	(b) (6)
				8.00	8.00	8.00	8.00	8.00	0	0															
HOURS WORKED EACH DAY																									
Other Deduction Detail: (b) (6)																									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 39.1		FOR WEEK ENDING 04/16/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF B.D.T.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					
				MON 10	TUE 11	WED 12	THU 13	FRI 14	SAT 15	SUN 16				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.11
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50					
Other Deduction Detail: (b) (6)																			

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2181.16
				0	0	0	0	0	0	0	0.00	0.00 0.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)		
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62					
Other Deduction Detail: (b) (6)																			

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017

Date April 21st, 2017

I, Marlee Roberts Project Admin.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

10th day of April, 2017, and ending the 16th day of April, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Revised Payroll #39.1

NAME AND TITLE:

Marlee Roberts, Project Admin.

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 40.1		FOR WEEK ENDING 04/23/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.						
				HOURS WORKED EACH DAY										* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions											
				MON 17	TUE 18	WED 19	THU 20	FRI 21	SAT 22	SUN 23				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS					
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1994.49 DD5225					
				0	0	0	0	0	0	0	0.00	0.00 0.00													
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								2669.80				
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1853.92 DD5226					
				0	0	0	0	0	0	0	0.00	0.00 0.00													
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								2788.00				
Other Deduction Detail: (b) (6)																									
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1511.23 DD5228					
				0	0	0	0	0	0	0	0.00	0.00 0.00													
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85								2667.70				
Other Deduction Detail: (b) (6)																									
(b) (6)	(b) (6)	Power Equip. Oper.: Group 10(cranes)	D	0	0	0	0	0	0	0	0.00	0.00 0.00	278.60	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	688.67 83243					
				0	0	0	0	0	0	0	0.00	0.00 0.00													
				S	4.00	0	0	0	0	0	0	4.00	45.30 24.35								848.80				
Other Deduction Detail: (b) (6)																									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017
PAYROLL
 (For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 40.1		FOR WEEK ENDING 04/23/2017		PROJECT AND LOCATION Calexico West LPOE - Phase 1 Calexico, CA	
				PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008	

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF HOLD	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK/ Check No.	
				HOURS WORKED EACH DAY										FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				MON 17	TUE 18	WED 19	THU 20	FRI 21	SAT 22	SUN 23										
(b) (6)	(b) (6)	Ironworker: Ommnl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	187.05	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	688.67	
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	3.00	0	0	0	0	0	0	3.00								33.50 28.85
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1749.24	
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								33.50 28.85
(b) (6)	(b) (6)	Ironworker: Ommnl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1790.68	
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								33.50 28.85
Other Deduction Detail: (b) (6)																				
(b) (6)	(b) (6)	Ironworker: Ommnl/Rnfrng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1981.85	
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				S	8.00	8.00	8.00	8.00	8.00	0	0	40.00								33.50 28.85
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage CA150002 (Mod. 9) Det:		ADDRESS 620 W. Commerce Ave Gilbert, AZ 85233	
PAYROLL NO. 40.1		FOR WEEK ENDING 04/23/2017		PROJECT AND LOCATION Calexico West LPOE – Phase 1 Calexico, CA	
PROJECT OR CONTRACT NO. 5915092/GS-09-P-15-KT-C-7008					

(1) NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	ST. OF BIRTH	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions					(9) NET WAGES PAID FOR WEEK/ Check No.	
				HOURS WORKED EACH DAY										FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*		TOTAL DEDUCTIONS
				MON 17	TUE 18	WED 19	THU 20	FRI 21	SAT 22	SUN 23										
(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	1914.10
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2759.50							
Other Deduction Detail: (b) (6)																				

(b) (6)	(b) (6)	Ironworker: Ommnt/Rnrcng/Strc	D	0	0	0	0	0	0	0	0.00	0.00 0.00	2494.00	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	(b) (6)	2181.15
				0	0	0	0	0	0	0	0.00	0.00 0.00								
				8.00	8.00	8.00	8.00	8.00	0	0	40.00	33.50 28.85	2675.62							
Other Deduction Detail: (b) (6)																				

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Certified Payroll-April 2017

Date April 27th, 2017

I, Suzanne Carlson Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

S & H Steel Co (a sub of Hensel Phelps) on the
(Contractor or Subcontractor)

Calexico West LPOE - Phase 1; that during the payroll period commencing on the
(Building or Work)

17th day of April, 2017, and ending the 23rd day of April, 2017

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or no behalf of said

S & H Steel Co (a sub of Hensel Phelps) from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(b) (6)

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-09-P-15-KT-C-7008, Wage Decision #CA150002 Mod 9 07/31/15, Revised Payroll #40.1

NAME AND TITLE:

Suzanne Carlson, Payroll Supervisor

SIGNATURE

Signed Electronically

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.